

# Naples City

People Serving People

## BUSINESS LICENSE APPLICATION

1420 East 2850 South  
 Naples, UT 84078  
 p. 435.789.9090 f.435.789.9458

Organization Type: <input type="checkbox"/> Sole Proprietor <input type="checkbox"/> Partnership <input type="checkbox"/> LLC <input type="checkbox"/> Corporation <input type="checkbox"/>		Is Business Name Registered with the State <input type="checkbox"/> Yes <input type="checkbox"/> No	
Business Status: <input type="checkbox"/> New <input type="checkbox"/> Location Change <input type="checkbox"/> Name Change <input type="checkbox"/> Ownership Change		Federal Tax ID#/SS# _____	
Nature of Business: <input type="checkbox"/> Contractor <input type="checkbox"/> Services <input type="checkbox"/> Oilfield <input type="checkbox"/> Retail/Wholesale <input type="checkbox"/> Home Occupation <input type="checkbox"/> Other: _____		Utah Sales Tax # _____	
Business Name: _____		State License # & Type (if applicable) _____	
Business Address: _____		City: _____	Zip _____
Business Telephone: _____	After Hours Emergency Contact: _____		Phone: _____
Mailing Address: (If Different) _____		City, State and Zip _____	
Description of Business Activities: _____			# of employees _____
Owners Name: _____		Home Address: _____	
Owners Driver License #/Work ID # _____		Home Phone: _____	
Owners Date of Birth _____		US Citizen <input type="checkbox"/> Yes <input type="checkbox"/> No	
Managers Name: (If Applicable) _____		Managers Home Address: _____	
Managers Home Address: _____		Phone: _____	
<b>Fee Amount</b>		<b>*****OFFICIAL USE ONLY*****</b>	
Base Fee _____ \$ _____	Approved by Building/Fire _____ Date _____		
Employees _____ x \$3.00 _____	Approved by Council _____ Date _____		
Class A Beer License _____	B/L # _____ Date Paid _____ Amt Received _____		
Class B _____	Receipt # _____ Received By _____ Date _____		
Class C _____			
Total Fees \$ _____			

The foregoing information is correct to the best of my knowledge. I am aware that this applications does not constitute approve to operate a business until approved by Naples City and a license has been issued. I hereby agree to conduct said business strictly in accordance with the law and ordinances covering such businesses, and that no other type of business will be conducted other than what has been stated above, and swear under penalty of law that the information contained herein is true.

\_\_\_\_\_  
 Signature of Owner/Applicant Date

\_\_\_\_\_  
 Please Print Name Title

If applicable please provide a **“Site Specific Plan”** and emergency contact information.